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## \*BIBDATASHEET\*

CONFIRMATION NO. 6501

Bib Data Sheet

|                                                                                                                                                                                                                                                               |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>SERIAL NUMBER</b><br>10/721,692                                                                                                                                                                                                                            | <b>FILING OR 371(c)<br/>DATE</b><br>11/25/2003<br><b>RULE</b>                                                     | <b>CLASS</b><br>435                | <b>GROUP ART UNIT</b><br>1647                                                                                                                                                                                                                                                      | <b>ATTORNEY<br/>DOCKET NO.</b><br>HUIP-P04-009 |
| <b>APPLICANTS</b><br>Douglas A. Melton, Lexington, MA;<br>Ali Hemmati-Brivanlou, New York, NY;                                                                                                                                                                |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 08/835,279 04/09/1997 PAT 6,686,198<br>which is a CON of 08/403,007 03/09/1995 ABN<br>which is a CIP of 08/136,748 10/14/1993 ABN                                                             |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>** FOREIGN APPLICATIONS *****</b>                                                                                                                                                                                                                          |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 01/26/2004                                                                                                                                                                         |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and<br>Acknowledged |                                                                                                                   | <b>STATE OR<br/>COUNTRY</b><br>MA  | <b>SHEETS<br/>DRAWING</b><br>0                                                                                                                                                                                                                                                     | <b>TOTAL<br/>CLAIMS</b><br>30                  |
| Examiner's Signature _____ Initials _____                                                                                                                                                                                                                     |                                                                                                                   | <b>INDEPENDENT<br/>CLAIMS</b><br>4 |                                                                                                                                                                                                                                                                                    |                                                |
| <b>ADDRESS</b><br>28120                                                                                                                                                                                                                                       |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>TITLE</b><br>METHOD OF INDUCING AND MAINTAINING NEURONAL CELLS                                                                                                                                                                                             |                                                                                                                   |                                    |                                                                                                                                                                                                                                                                                    |                                                |
| <b>FILING FEE<br/>RECEIVED</b><br>518                                                                                                                                                                                                                         | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                                |